Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

٠		s	MALL E	NTITY		OTHER	THAN					
_	-		(Column	(Column 1)		(Column 2)		TYPE		OR		
TOTAL CLAIMS			\mathcal{L}		•			RATE	FEE	7.	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	E	BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/ minus 20=		*	0		X\$ 9=		OR	X\$18=	
IŃ	DEPENDENT C	LAIMS	2 minus 3 = 1		*	0		X43=		OR	X86=	<i>-</i>
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	_
* If the difference in column 1 is less than zero, enter "0" in					"0" in c	olumn 2	<u></u>	TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II									-		OTHER	THAN
(Column 1) (Column 2)						(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CLAHA	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		AL	DDIT. FEE		. ,	ADDII. FEE						
_		(Column 1) CLAIMS		(Colum	ST	(Column 3)		ı	ADDI-	ı		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	·
	Independent	*	Minus	***		=		X43=		OR	X86=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									"		
							L	+145=		OR	+290=	
							AD	TOTAL DIT. FEE	•	OR ,	TOTAL ADDIT. FEE	
		(Column 1)	(Column 3)		-							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE	. [RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	,	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* 14	# If the ontox is solume 1 is less than the natural value of the same of the s									OR	+290=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								·	OR A	TOTAL DDIT. FEE	
- -1	r tne "Highest Nur The "Highest Num	mber Previously Pa ber Previously Paid	o For IN THIS For (Total or	S SPACE is I Independen	less than t) is the l	3, enter "3." nighest number		OIT. FEE L	opriate box			